

Medicaid: Emergency Safety Intervention

According to the DHS/DCFS Contract, Part II. D. 5. g.,

Emergency Safety Intervention

(7) When any behavioral intervention results in physical injury to any person, the Division shall be notified within one hour.

(8) Within one hour after the use of a behavioral intervention, the staff person who implemented the procedure shall complete a written incident report as required by current DHS/OJJS Incident Report Reference Guide (<http://www.hspolicy.utah.gov>, DHS/OJJS Policy Section 5). The report should be reviewed and approved or acted upon by the Contractor's program director or designee. A copy of the report shall be sent to the Case Manager within 24 hours of the incident. The report shall contain, at a minimum, the following information:

- (a) Description of the intervention employed, including beginning and ending times;*
- (b) Description of the Client's behavior necessitating the use of the intervention;*
- (c) Description of any less intrusive interventions used to resolve the behavioral crisis;*
- (d) Why the procedure was judged necessary;*
- (e) Assessment of the likelihood the behavior necessitating the intervention shall reoccur; and*
- (f) Description of any injury to any person, animal, or property.*

(9) Notification of Emergency Safety Intervention.

The Contractor shall:

- (a) Notify the Case Manager within 24 hours after the initiation of each emergency safety intervention;*
- (b) Document in the Client's record that the Division has been notified of the emergency safety intervention, including the date and time of notification, the name of the Division staff receiving the notification, and the name of the Contractor's staff person providing the notification; and*
- (c) Complete a written incident report regarding the use of all behavioral interventions, which shall be kept in the Client's file and the Home-to-Home Packet/Traveling File.*

(10) Post Intervention Debriefings: Within 72 hours after a behavioral intervention, the Contractor shall ensure the following occurs:

- (a) Staff involved in the intervention, the Client and, if available the Case Manager shall have a face-to-face discussion. This discussion shall include all staff involved in the intervention except when the presence of a particular staff person may jeopardize the well-being of the Client. Other staff and the Client's parent(s) may participate in the discussion when it is deemed appropriate by DHS or the Contractor. The Contractor shall provide both the Client and staff the opportunity to discuss the circumstances resulting in the use of emergency safety interventions and strategies to be used by the staff, the Client, or others that could prevent the future use of a behavioral intervention. The Contractor shall apply trauma informed care when processing information with the Client.*
- (b) A debriefing session to include all staff involved in the intervention, and appropriate supervisory and administrative staff, shall include, at a minimum, a review and discussion of:*
 - i. The emergency safety situation that required the intervention, including a discussion of the precipitating factors that led up to the intervention;*

- ii. Alternative techniques that might have prevented the intervention; and*
- iii. The outcome of the intervention, including any injuries that may have resulted from the intervention.*

(11) The Contractor shall ensure the Behavioral Review

Committee convenes as follows:

- (a) When behavioral intervention procedures are used two times or more within 30 days, the Contractor shall convene the Committee within five days of the second incident. The Case Manager and Contract Monitor(s) shall be invited to attend the meeting.*
- (b) When any behavioral intervention results in physical injury to the Client or staff, the Contractor shall convene the Committee within five days. The Case Manager and Contract Monitor shall be invited to attend the meeting.*
- (c) Upon request of the Case Manager or Contract Monitors.*
- (d) A Contractor that is a sole practitioner shall notify the Contract Monitor when behavioral intervention procedures are used two times or more within 30 days, but is not required to convene a Behavioral Management Review Committee.*

(12) Behavioral Management Review Committee response requirements:

- (a) Develop a written program of positive reinforcement addressing competing positive behaviors or alternatives;*
- (b) Develop specific written protocols for the restrictive intervention;*
- (c) Identify antecedents and vulnerability factors that contribute to the behavior; and*
- (d) Consider the use of trauma informed care in understanding the Client's behavior.*